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# Howard Howard

law for business

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## FACSIMILE TRANSMISSION

TO: UNITED STATES PATENT AND TRADEMARK OFFICE

FAX NO:

(703) 308-7751

FROM:

JON E. SHACKELFORD

PAGES:

3. including cover sheet

DOCUMENTS ENCLOSED: <u>Revocation of Power of Attorney and Appointment of New Power of Attorney for Serial Nos. 10/802,641 and 10/760,053</u>

### Certificate of Transmission Under 37 C.F.R. 1.8

I hereby certify that this correspondence is being submitted via facsimile (703) 308-7751 to the United States Patent and Trademark Office on June 16, 2004.

Rainie L. Mills

PTO/SB/82 (08-03)
Approved for use through 11/30/2005. OMB 0651-0035
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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#### REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY

Sporte to a canacatori or interins	
Application Number	10/802,641
Filing Date	March 16, 2004
First Named Inventor	Jian Lu
Art Unit	3682
Examiner Name	
Attorney Docket Number	71024-577

I hereby revoke all previous powers of attorney given in the above-identified application:								
A Power of Attorney is submitted herewith.								
OR Number 2								
i hereby appoint the practitioners at Customer Number: 27305								
Please change the correspondence address for the above-identified application to:								
The address associated with Customer Number:	; 							
Firm or Individual Name								
Address								
Address								
City	<del></del>							
Country	State	ļ	ZIP					
Telephone	Fax							
I am the:								
Applicant/Inventor								
Assignee of record of the entire interest. See 37	CFR 3.7	1						
Statement under 37CFR 3.73(b) is enclosed (Fo.	m PTO/S	SB/96)						
CIONATUDE of Applicant of Ass								
SIGNATURE of Applicant or Assignee of Record								
Name David M. Sherbin								
Signature Wend Will.								
Date 6-16-04 ()								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
Total offorms are submitted.								

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, use 3 minutes to complete to process) an application form to the USPTO. Time will vary depending on the individual case. Any comments including galhering, preparing, and submitting the completed application for to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application Number 10/760,053

Filling Date Iapuary 16, 2004

#### REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

+ 6

Application Number 10/760,053

Filing Date January 16, 2004

First Named Inventor David Nelson

Art Unit Examiner Name

Attorney Docket Number 71,024-579

I hereby revoke all previous powers of attorney given in the above-identified application.						
A Power of Attorney i						
OR  ✓ I hereby appoint the	practitioners associated	with the Customer Number	;	27305		
		or the above-identified appl	ication to:			
	er:	27305				
OR						
Firm or Individual Name	:					
Address	·					
Address						
City		State		Zip		
Country						
Telephone		Fax				
I am the:  Applicant/Inventor.  Assignee of record  Statement under 3	of the entire interest. Se 7 CFR 3.73(b) is enclose	d. (Form PTO/SB/96)				
A	SIGNATURE of AP	plicant or Assignee of Re	ecora			
Name Contain State	Stud					
Date (0-V)	3-04		248 354-9924			
NOTE: Signatures of all the Inventors signature is required, see below".	; or essignees of record of the entire	e interest or their representative(s) are	required, Submit n	nultiple forms if more than one		
	ns are submitted.					

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